

| POSITION                         | INITIALS | PC | DATE            |
|----------------------------------|----------|----|-----------------|
| <b>FEE DETERMINATION</b>         |          |    |                 |
| <b>O.I.P.E. CLASSIFIER</b>       |          |    | <i>b</i> 8-7-01 |
| <b>FORMALITY REVIEW</b>          |          |    |                 |
| <b>RESPONSE FORMALITY REVIEW</b> |          |    |                 |

BEST AVAILABLE COPY

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

| Claim | Final | Original | Date    |
|-------|-------|----------|---------|
| 1     | 0     | ✓        | 5/17/02 |
| 2     | ✓     | ✓        | 5/17/02 |
| 3     | ✓     | ✓        | 5/17/02 |
| 4     | ✓     | ✓        | 5/17/02 |
| 5     | ✓     | ✓        | 5/17/02 |
| 6     | ✓     | ✓        | 5/17/02 |
| 7     | ✓     | ✓        | 5/17/02 |
| 8     | ✓     | ✓        | 5/17/02 |
| 9     | ✓     | ✓        | 5/17/02 |
| 10    | ✓     | ✓        | 5/17/02 |
| 11    | ✓     | ✓        | 5/17/02 |
| 12    | ✓     | ✓        | 5/17/02 |
| 13    | ✓     | ✓        | 5/17/02 |
| 14    | ✓     | ✓        | 5/17/02 |
| 15    | ✓     | ✓        | 5/17/02 |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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